Mission Hills School



APPLICATION FOR ADMISSION (To be completed by student's parents or guardian)		Applying for gro	ade Fall/S	5pring 20	
To be completed by Student's parents of guardians		Date of A	Application	ation / / 20	
Student's Full Name:Last		First	Mid	 dle Name	
Student's Primary Address:					
Student's Primary Address:Street		City	State	Zip	
Student's Home Phone: ()		SSN:			
Date of Birth://	Gender: M	F			
thnicity: (pick from these options)					
African-American/Black	Amer	rican Indian/Alaska Native	Hispanic/	'Latino/Mexican	
Pakistani	Cauco	asian/White	East Indi	ian (India)	
Afghan	Chinese		Filipino	Filipino	
Persian	Japanese		Native Hawaiian		
Korean	Vietn	amese	Other		
Current School:			Current Grade:		
Current School Address:					
Street		City	State	Zip	

Current School Phone: (_____) ____ - _

FAMILY INFORMATION | PARENT 1

Parent's Name:	Last		First	
Parent's Occupation:			Parent's relationship to Applicant:	
Parent's Home Phone:	(Parent's Employer:	
Parent's Day Phone:	()		Employer Address:	
Parent's Cell Phone:	()			
Parent's Email Address:				
Parent's Home Address: (if	other than that of Applicant)			
Stre	et	City	State	Zip
FAMILY INFORMAT	TION PARENT 2			
Parent's Name:				
	Last		First	
Parent's Occupation:			Parent's relationship to Applicant:	
Parent's Home Phone:	()		Parent's Employer:	
Parent's Day Phone:	()		Employer Address:	
Parent's Cell Phone:	()			
Parent's Email Address:				
Parent's Home Address: (if	other than that of Applicant)			
		<u>-</u>		
Stre	et	City	State	Zip
FAMILY INFORMAT	TION STEP-PARENT OR LEGA	AL GUARDIAN (if app	plicable)	
Name:				
	Last		First	
Occupation:			Employer:	
Home Phone:	(Employer Address:	
Day Phone:	()			
Cell Phone:	()			
Email Address:				
Home Address: (if other th	nan that of Applicant)			
Stre	et	City	State	Zip
FAMILY INFORMAT	TION OTHER			
Student lives with (pick f	rom these options):			
Both Par			Father	
Mother of Guardian		& Step-Mother arent (s)	Both Parents in Different (Court Documents req	
	na has he/she lived with you?			

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Name	Age	Grade	Ever attended MHMS/MHS	5? Yes No
Name	Age	Grade	Ever attended MHMS/MHS	5? Yes No
Name	Age	Grade	Ever attended MHMS/MHS	5? Yes No
What language is spoken most at home?				
What other languages do family member	rs speak fluently?			
*Is your child ELL (English Language Led	arner)?Yes_	No		
*Does your child have special needs (for	example, medication	<mark>ı, language developmen</mark>	t delay, behavioral, emotion	al, or social issues, etc.)?
Yes No (if yes, please se	ze administration) / F	Has your child ever had	l an IEP? Yes	No
*Has your child ever been suspended or	expelled from anoth	er program?\	es No (if yes, please	see administration)
How did you hear about Mission Hills Mi	ddle School? Check o	all that apply.		
MHS Website		Phone Contact with	MHS Staff	Relative Attending
Campus Visit/Open House	_	Advertisement		_Mailer
Current MHS Friend - Far	nily Name:			
I/We consent to allow my/our child's im disclosed.	age to be used on the No	e MHS Facebook page	or website and understand t	that no child's name or age will be
Mission Hills School's admissions policies any other characteristic protected by t assistance nor does it discriminate amor	he law. The school d	oes not discriminate ir	the admission of its studen	
I certify that all information given on al result in denial or my application or dism	• •	•	ete. I understand that any	omission or misinformation may
Tuition Schedule: Option 1: One paym	ent (full amount): _		Option 2: Ten payment	ts:
I have received, read, and agree to t	he MHS tuition sch	edule.	Initial:	
Please enclose a check made payable t	to Mission Hills Scho	ool for the non-refun	dable registration fee of \$	\$250.
Ed. d. C L			5 .1	
Father's Signature:			Date:	
Mother's Signature:			Date:	
Received				
Registration Fee	_			
CASH CHECK CHECK#: Start Date	_			
Tuition	_			
IDProcessed	_		****	Hills School omar Vista Ave
Welcome email	_		Castro V	alley, CA 94546
			(510) 31/-862/	/ www.mhmschool.org

Revised 11.30.2017

Names, ages and grade in school of other children in the family